20-81-1205 (7ÅRA [2- TEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s) : Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 APR 1 4 2005 Alexandria, Virginia 22313-1450 INSTRUCTIONS: This form should be used for transfuling the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent appropriate. All further correspondence including the Patent appropriate and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1109 (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. (703) 746-4000 CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 03/02/2005 26698 7590 MYRIAD GENETICS INC. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. INTELLECUTAL PROPERTY DEPARTMENT 320 WAKARA WAY SALT LAKE CITY, UT 84108 04/19/2005 RFEKADUZ 00000047 501627 10040969 Stamper Hacey Haneses (Signature 300.00 DA 01 FC:1504 02 FC:1501 1400.00 DA (Date <u>Apri</u>l 14 2005 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO. 10/040.969 01/04/2002 John Manfredi 1418.03 1729 TITLE OF INVENTION: METHOD OF DETECTING PROTEIN-PROTEIN INTERACTIONS APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE 06/02/2005 nonprovisional YES \$700 \$300 \$1000 **EXAMINER** ART UNIT CLASS-SUBC LASS **BURKHART, MICHAEL D** 1636 435-007100 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list ı<u>Jay Z. Zhan</u>q (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Andrew Gibbs (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Myriad IP Department 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Myriad Genetics, Inc.

Salt Lake City, Utah

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Date_ April 14, 2005

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